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PTO/SB/50 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box Reissue Washington, DC 20231	<i>Attorney Docket No.</i>	P296REI\1737.073REI0)
	<i>First Named Inventor</i>	Chirag B. SHAH
	<i>Original Patent Number</i>	6,248,127
	<i>Original Patent Issue Date (Month/Day/Year)</i>	06/19/01
	<i>Express Mail Label No.</i>	

APPLICATION FOR REISSUE OF: Utility Patent Design Patent Plant Patent
(check applicable box)

APPLICATION ELEMENTS (37 CFR 1.173)		ACCOMPANYING APPLICATION PARTS	
1. <input checked="" type="checkbox"/>	Fee Transmittal Form (PTO/SB/56) <i>(Submit an original, and a duplicate for fee processing)</i>	10. <input checked="" type="checkbox"/>	Statement of Status/support for all changes to the claims. See 37 CFR 1.173(c).
2. <input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.	11. <input type="checkbox"/>	Original U.S. Patent for surrender <input type="checkbox"/> Ribboned Original Patent Grant <input type="checkbox"/> Statement of Loss (PTO/SB/55)
3. <input checked="" type="checkbox"/>	Specification and Claims in double column copy of patent format (<i>amended, if appropriate</i>)	12. <input type="checkbox"/>	Foreign Priority Claim (37 USC 119) <i>(if applicable)</i>
4. <input type="checkbox"/>	Drawing(s) (<i>proposed amendments, if appropriate</i>)	13. <input checked="" type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
5. <input checked="" type="checkbox"/>	Reissue Oath / Declaration (original or copy) <i>(37 CFR §1.175) (PTO/SB/51 or 52)</i>	14. <input type="checkbox"/>	English Translation of Reissue Oath/Declaration <i>(if applicable)</i>
6. <input type="checkbox"/>	Power of Attorney	15. <input checked="" type="checkbox"/>	Preliminary Amendment
7. Original U.S. Patent currently assigned?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, Check applicable box(es))</i>	16. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
a. <input type="checkbox"/>	Written Consent of all Assignees (PTO/SB/53)	17. <input checked="" type="checkbox"/>	Other: 1) Advance Notification Postcard 2) Application Data Sheet 3) Credit Card Payment Form (PTO-2038) 4) Certificate Under 37 C.F.R. § 3.73(b) as filed in U.S. Application No. 09/138,464 with a copy of the Assignment and Merger documents in the chain of title attached
b. Specification Sequence Listing on:	i. <input type="checkbox"/> CD-ROM (2 copies) or CD-R (2 copies), or ii. <input type="checkbox"/> paper		
c. <input type="checkbox"/>	Statements verifying identity of above copies		

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Signature	Vincent L. Capuano	Date	10/7/03

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

P296REI (1737.073REI0)

Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee		Rate
(A) 13	Total Claims (37 CFR 1.16(j))	(B) 13	0 =	x \$ _____ =		or	x \$18.00 = 0
(C) 1	Independent Claims (37 CFR 1.16(i))	(D) 1	0 =	x \$ _____ =			x \$86.00 = 0
							\$ 770.00
						OR	\$ 770.00

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee		Rate
Total Claims (37 CFR 1.16(j))	26	MINUS	20	6 =	x \$ _____ =		x \$18.00 =	108.00
Independent Claims (37 CFR 1.16(i))	2	MINUS	3	0 =	x \$ _____ =		x \$86.00 =	
							OR	\$ 108.00

* If the entry in (D) is less than the entry in (C), write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

 Applicant claims small entity status. See 37 CFR 1.27. Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed. The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. _____. A duplicate copy of this sheet is enclosed. A check in the amount of \$ _____ to cover the filing/additional fee is enclosed. Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

10/7/03

Date

Signature of Applicant, Attorney, or Agent of Record

42,385

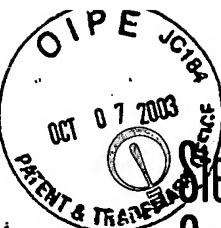
Vincent L. Capuano

Registration Number, if applicable

Typed or printed name

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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1659117648 U.S.PTO
10/07/03

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October 7, 2003

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Mail Stop Reissue

1659117648 U.S.PTO
10/679965
10/07/03



Re: U.S. Reissue Utility Patent Application
Appl. No. *To Be Assigned*; Filed: *Herewith*
(*Reissue of U.S. Patent No. 6,248,127; Issued: June 19, 2001*)
For: **Thromboresistant Coated Medical Device**
Inventors: Shah *et al.*
Our Ref: P296REI (1737.073REI0)

Sir:

Transmitted herewith for appropriate action are the following documents:

1. Reissue Patent Application Transmittal Form (PTO/SB/50);
2. Reissue Application Fee Transmittal Form (PTO/SB/56);
3. Reissue Application Declaration by the Assignee (PTO/SB/52);
4. Reissue Application: Consent of Assignee; Statement of Non-Assignment (PTO/SB/53);
5. Statement Under 37 C.F.R. § 3.73(b) (PTO/SB/96);
6. Certificate Under 37 C.F.R. § 3.73(b) as filed in U.S. Application No. 09/138,464 with a copy of the Assignment and Merger documents in the chain of title attached;
7. Specification and Claims in double column copy of patent format (12 pages);
8. Preliminary Amendment;
9. Statement Under 37 C.F.R. § 1.173(c) Regarding Status of Claims and Support for Claim Changes;
10. Information Disclosure Statement;
11. PTO-1449 Form (1 page) citing 1 reference;
12. Copy of the cited reference;
13. Application Data Sheet;
14. Credit Card Payment Form (PTO-2038); and
15. Two (2) return postcards.

Commissioner for Patents
October 7, 2003
Page 2

It is respectfully requested that the attached postcard be stamped with the date of filing of these documents, and that it be returned to our courier. In the event that extensions of time are necessary to prevent abandonment of this patent application, then such extensions of time are hereby petitioned.

The U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, or credit any overpayment, to our Deposit Account No. 19-0036.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.



Vincent L. Capuano
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Registration No. 42,385

VLC/M-R:krd
Enclosures

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